



U.S. Department of Homeland Security
U.S. Immigration and Customs Enforcement
Office of Professional Responsibility
Inspections and Detention Oversight Division
Washington, DC 20536-5501

Office of Detention Oversight
Compliance Inspection

Enforcement and Removal Operations
ERO San Diego Field Office

Otay Mesa Detention Center
San Diego, California

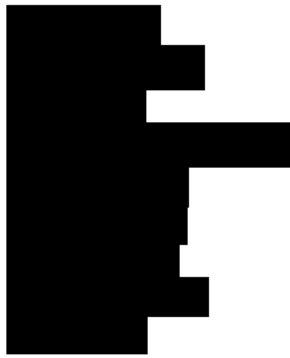
February 25-27, 2020

COMPLIANCE INSPECTION
of the
OTAY MESA DETENTION CENTER
San Diego, California

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FACILITY OVERVIEW

The Immigration and Customs Enforcement (ICE) Office of Professional Responsibility (OPR) Office of Detention Oversight (ODO) conducted a compliance inspection of the Otay Mesa Detention Center (OMDC) in San Diego, California, from February 25 to 27, 2020.¹ The facility opened in 2015 and is owned and operated by CoreCivic. The ICE Office of Enforcement and Removal Operations (ERO) began housing detainees at OMDC in 2015 under the oversight of ERO's Field Office Director in San Diego (ERO San Diego). The facility operates under the Performance-Based National Detention Standards (PBNDS) 2011 (Revised 2016).

ERO San Diego has assigned Deportation Officers and a Detention Services Manager to the facility. An OMDC warden handles daily facility operations and is supported by ██████ personnel. Trinity Food Service provides food services, ICE Health Service Corp provides medical care, and Keefe provides commissary services at the facility. The facility was accredited by the American Correctional Association in January 2020, and the National Commission on Correctional Health Care in June 2017.

Capacity and Population Statistics	Quantity
ICE Detainee Bed Capacity ²	1142
Average ICE Detainee Population ³	1002
Male Detainee Population (as of 2/25/2020)	867
Female Detainee Population (as of 2/25/2020)	135

During its last inspection, in FY 2018, ODO found 12 deficiencies in the following areas: Admission and Release (1); Environmental Health and Safety (2); Use of Force and Restraints (2); Grievance System (6); and Staff-Detainee Communication (1).

¹ This facility holds male and female detainees with low, medium-low, medium-high, and high security classification levels for periods longer than 72 hours.

² Data Source: ERO Facility List Report as of February 16, 2020.

³ *Ibid.*

COMPLIANCE INSPECTION PROCESS

ODO conducts oversight inspections of ICE detention facilities with an average daily population greater than ten, and where detainees are housed for longer than 72 hours, to assess compliance with ICE national detention standards. These inspections focus solely on facility compliance with detention standards that directly affect detainee life, health, safety, and/or well-being.⁴

ODO identifies violations of ICE detention standards, ICE policies, or operational procedures as “deficiencies.” For facilities governed by either the PBNDS 2008 or 2011, ODO specifically notes deficiencies related to ICE-designated “priority components,” which are considered critical to facility security and the legal and civil rights of detainees. ODO also highlights instances in which the facility resolves deficiencies prior to completion of the ODO inspection. Where applicable, these corrective actions are annotated with “C” under the *Compliance Inspection Findings* section of this report.

Upon completion of each inspection, ODO conducts a closeout briefing with facility and local ERO officials to discuss preliminary findings. A summary of these findings is shared with ERO management officials. Thereafter, ODO provides ICE leadership with a final compliance inspection report to: (i) assist ERO in developing and initiating corrective action plans; and (ii) provide senior executives with an independent assessment of facility operations. ODO’s findings inform ICE executive management in their decision-making to better allocate resources across the agency’s entire detention inventory.

⁴ ODO reviews the facility’s compliance with selected standards in their entirety.

FINDINGS BY PERFORMANCE-BASED NATIONAL DETENTION STANDARDS 2011 MAJOR CATEGORIES

PBNDS 2011 Standards Inspected ⁵	Deficiencies
Part 1 – Safety	
Environmental Health and Safety	2
Sub-Total	2
Part 2 – Security	
Admission and Release	1
Custody Classification System	0
Funds and Personal Property	2
Sexual Abuse and Assault Prevention and Intervention	0
Special Management Units	0
Staff-Detainee Communication	0
Use of Force and Restraints	0
Sub-Total	3
Part 4 – Care	
Food Service	1
Medical Care	1
Significant Self-harm and Suicide Prevention and Intervention	0
Disability Identification, Assessment, and Accommodation	1
Sub-Total	3
Part 5 – Activities	
Recreation	0
Religious Practices	1
Telephone Access	0
Visitation	0
Sub-Total	1
Part 6 – Justice	
Grievance Systems	0
Law Libraries and Legal Materials	0
Sub-Total	0
Total Deficiencies	9

⁵ For greater detail on ODO's findings, see the *Compliance Inspection Findings* section of this report.

DETAINEE RELATIONS

ODO interviewed 18 detainees, who each voluntarily agreed to participate. None of the detainees made allegations of discrimination. Most detainees reported satisfaction with facility services except for the concerns listed below.

Medical Care: One detainee stated she had not received a response regarding a medical request she submitted for her thyroid.

- Action Taken: ODO reviewed the detainee's medical records which revealed an intake screening was completed on January 6, 2019, a thyroid problem was diagnosed, and the detainee was referred to the facility medical provider. On January 7, 2019, a physical examination was performed and lab work was ordered due to a history of hypothyroidism. On January 9, 2019, a lab test was performed and on January 16, 2019, the lab test was reviewed, which showed low thyroid hormone. On March 12, 2019, the detainee was prescribed the medication Levothyroxine 25mg for her thyroid. On March 29, 2019, a fine needle biopsy was performed, and the result was negative for malignancy. The detainee has an appointment scheduled for May 25, 2020, for a follow-up and an annual physical exam.

Sexual Abuse and Assault Prevention and Intervention: One detainee stated he was assaulted by a facility staff member while leaving the food service area in October 2019. He said the officer pulled his pants down baring his buttocks during a pat down to search for contraband.

- Action taken: ODO spoke with the facility staff, the local ICE/ERO San Diego staff, reviewed the detainee's detention file and reviewed the alleged Sexual Abuse Assault Prevention Intervention incident captured on the facility's cameras. ODO determined when the San Diego County Sheriff's Department investigated the allegation, there were no positive findings and the detainee was notified his allegation of the assault was unfounded. Additionally, ODO found the facility staff had previously warned the detainee about attempting to remove contraband items from the food service area to take back to his housing unit. The officers searched the detainee to remove the contraband items taken from the food service area.

Religious Practices: One detainee stated he was taken off his religious diet.

- Action Taken: ODO spoke with the facility staff and reviewed the food service's special diet records and found the detainee was removed from his religious diet on January 14, 2020. ODO spoke with the facility chaplain, who stated the detainee signed an acknowledgement of his removal from his religious diet due to continuously taking unauthorized food items from the facility kitchen. The detainee requested on February 26, 2020 to be put back on the religious diet. After a 30-day waiting period, per the acknowledgement of removal agreement, the detainee signed, his religious diet would be reinstated.

COMPLIANCE INSPECTION FINDINGS

SAFETY

ENVIRONMENTAL HEALTH AND SAFETY (EH&S)

The facility did not have a dedicated barber shop, so detainees received barber services in the multipurpose rooms in the detainee housing units; however, covered metal waste disposal containers were not available. The metal covered containers were ordered on February 26, 2020 (**Deficiency EH&S-1**⁶).

Further inspection of the barber shop found safety regulations were not conspicuously posted in all areas where hair care personnel worked (**Deficiency EH&S-2**⁷).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action on February 26, 2020 by posting detailed hair care sanitation regulations in hair cutting areas (**C-1**).

SECURITY

ADMISSION AND RELEASE (A&R)

ODO reviewed 28 detainee detention files and found two files did not contain an Order to Detain Form (Form I-203) signed by an authorized ERO official (**Deficiency A&R-1**⁸).

FUNDS AND PERSONAL PROPERTY (F&PP)

ODO reviewed 28 detainee detention files and found all the detention files included separate inventory forms for U.S. currency. However, while reviewing the same detention files, ODO also found valuables and foreign currency were inventoried and put on the personal property inventory form and not put on a separate form as required by the standard (**Deficiency F&PP-1**⁹). One out of 28 detainee files reviewed did not state the type of foreign currency nor the amount received (**Deficiency F&PP-2**¹⁰).

⁶ “Each barbershop shall have all equipment and facilities necessary for maintaining sanitary procedures for hair care, including covered metal containers for waste, disinfectants, dispensable headrest covers, laundered towels and haircloths.” See ICE PBNDS 2011, Standard, Environmental Health and Safety, Section (V)(E)(2).

⁷ “Detailed hair care sanitation regulations shall be conspicuously posted in each barbershop for the use of all hair care personnel and detainees.” See ICE PBNDS 2011, Standard, Environmental Health and Safety, Section (V)(E)(4). **This is a Repeat Deficiency.**

⁸ “An Order to Detain or an Order to Release the detainee (Form I-203 or I-203a), bearing the appropriate ICE/ERO Authorizing Official signature, must accompany each newly arriving detainee.” See ICE PBNDS 2011, Standard, Admission and Release, Section (V)(E). **This is a Priority Component.**

⁹ “An itemized inventory of all detainee baggage and personal property (separate from funds and valuables) shall be completed during admissions processing using the personal property inventory form.” See ICE PBNDS 2011, Standard, Funds and Personal Property, Section (V)(I).

¹⁰ “The G-589 shall include in the “Description” column for foreign currency, the currency amount followed by the type (e.g., 140 Japanese Yen, 300 Euros, 4,000 Mexican Pesos).” See ICE PBNDS 2011, Standard, Funds and Personal Property, Section (V)(G)(1)(F)(4).

CARE

FOOD SERVICE (FS)

ODO reviewed 20 food service detainee worker files and found four detainee workers were not medically cleared to work in food service (**Deficiency FS-1¹¹**).

Corrective Action: Prior to the completion of the inspection, the facility initiated corrective action by cooperating with the OMDF medical staff to clear all detainees assigned to work in food service (**C-2**).

MEDICAL CARE (MC)

ODO reviewed ■ nurse credential files and found ■ nurse credential files did not contain documentation of a peer review being accomplished (**Deficiency MC-1¹²**).

DISABILITY IDENTIFICATION, ASSESSMENT, AND ACCOMMODATION (DIA&A)

The facility orientation program did not notify or inform detainees about the facility's disability accommodations policy, including their right to request reasonable accommodations nor how to make a request for reasonable accommodations (**Deficiency DIA&A-1¹³**).

ACTIVITIES

RELIGIOUS PRACTICES (RP)

ODO observed the religious services schedules were not posted in all the house units (**Deficiency RP-1¹⁴**).

CONCLUSION

During this inspection, ODO assessed the facility's compliance with 18 standards under PBNDS 2011 (Revised 2016) and found the facility in compliance with 11 of those standards. ODO found nine deficiencies in the remaining seven standards. ODO commends facility staff for their responsiveness during this inspection and notes there were two instances where staff initiated

¹¹ "The medical department shall document detainees' clearance for food service work prior to their assuming food service duties. The food service department shall refer to the medical department detainees that have been absent from work for reasons of communicable illness, for a determination of medical clearance prior to resuming food service work." See ICE PBNDS 2011, Standard, Food Service, Section (V)(J)(3).

¹² "The HSA shall implement an intra-organizational, external peer review program for all independently licensed medical professionals. Reviews shall be conducted at least ■." See ICE PBNDS 2011, Standard, Medical Care, Section (V)(EE)(3).

¹³ "The facility orientation program required by standard 2.1, "Admission and Release," and the detainee handbook required by standard 6.1, "Detainee Handbook," shall notify and inform detainees about the facility's disability accommodations policy, including their right to request reasonable accommodations and how to make such a request." See ICE PBNDS 2011, Standard, Disability Identification, Assessment, and Accommodation, Section, (V)(J).

¹⁴ "The chaplain or religious services coordinator shall schedule and direct the facility's religious activities, and current program schedules shall be posted on all unit and detainee bulletin boards in languages understood by a majority of detainees." See ICE PBNDS 2011, Religious Practices, Standard, Section (V)(D).

immediate corrective action during the inspection. ODO noted one repeat deficiency in EH&S for the facility barber shop not posting safety regulations.

ODO recommends ERO work with the facility to resolve any deficiencies that remain outstanding in accordance with contractual obligations.

Compliance Inspection Results Compared	FY 2018 (PBNS 2011)	FY 2020 (PBNS 2011)
Standards Reviewed	16	18
Deficient Standards	2	7
Overall Number of Deficiencies	2	9
Deficient Priority Components	0	1
Repeat Deficiencies	N/A	1
Corrective Actions	0	2